

Copy B To Be Filed With Employee's FEDERAL Tax Return.		2023		OMB No. 1545-0008
a Employee's social security number XXX-XX-1794	1 Wages, tips, other compensation 119015.53	2 Federal income tax withheld 18518.78		
b Employer ID no. (EIN) 01-0233346	3 Social security wages 123936.21	4 Social security tax withheld 7684.05		
	5 Medicare wages and tips 123936.21	6 Medicare tax withheld 1797.08		
c Employer's name, address, and ZIP code JOHN HANCOCK LIFE INS. CO. (U.S.A.) US TAXATION C-05 1-877-455-2055 197 Clarendon Street Boston, MA 02116				
d Control number				
e/f Employee's name, address, and ZIP code Narendra Varma Vegesna 8000 Avalon Boulevard, Suite 205 Alpharetta, GA 30009				
7 Social security tips	8 Allocated tips	9		
10 Dependent care benefits	11 Nonqualified plans	12a Code C	267.28	
13 Statutory employee	14 Other	12b Code D	4920.68	
Retirement plan X		12c Code DD	19001.64	
Third-party sick pay		12d Code		
GA 1883729XR	119015.53	6360.35		
15 State Employer's state ID no.	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

**Form W-2 Wage and Tax Statement**

Department of the Treasury—IRS

This information is being furnished to the Internal Revenue Service.

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return		2023		OMB No. 1545-0008
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13 Statutory employee	14 Other	12b Code D	4920.68	
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Third-party sick pay		12d Code		
GA 1883729XR	119015.53	6360.35		
15 State Employer's state ID no.	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

**Form W-2 Wage and Tax Statement**

Department of the Treasury—IRS

Copy C—For EMPLOYEE'S RECORDS		2023		OMB No. 1545-0008
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**Form W-2 Wage and Tax Statement**

Department of the Treasury—IRS

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

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